## RECEIVED APR 2 1 2011

## ADVISORY COMMITTEE APPLICATION FOR BOARD APPOINTMENT

It is the applicant's responsibility to keep the information on this form current.

To advise the County of any changes please contact Christine Coble by telephone at 606-5300 or by e-mail at CobleC@leoncountyfl.gov

Applications will be discarded if no appointment is made after two years.



-					
	Name: Debra Benson				Date: 04/17/2011
	Home Phone: 850-561-6942 Work Phone		<b>:</b>	Email: djb1013@earthlink.net	
	Occupation: None		Employer: None		
	Please check box for preferred to	d mailing address.			
	9 Work Address:				
	City/State/Zip:				
\/	Home Address: 2305 Killearn Center Blvd., C67				
	City/State/Zip: Tallahassee, FL 32309				
•	Do you live in Leon County? Yes No If yes, do you live within the City limits? Yes No Do you own property in Leon County? Yes No If yes, is it located within the City limits? Yes 9 No For how many years have you lived in and/or owned property in Leon County? Years  Are you interested in serving on any specific Committee(s)? If yes, please indicate your preference				
1st Choice: Leon County Commission on the Status of Women and Girls 2nd Choice:					
	If not interested in any specific those areas in which you are interested and Arts Environment Human Services Housing	erested, or de: iental/ Growth	not listed: to and to where with the common to the first \$30 accommon	talie Telephonik Hedina Heliphonik	
į	Other Areas Other Areas Other Areas Other Areas Other Areas Other Areas				
	Have you served on any previou	9Yes No	e garage		
-	How many days per month would you be willing to commit for Committee work? 9 1 9 2 to 3 9 4 or more  And for how many months would you be willing to commit that amount of time? 9 2 9 3 to 5 9 6 or more  What time of day would be best for you to attend Committee meetings? 9 Day 9 (Night)  (OPTIONAL) Leon County strives to meet its goals, and those contained in various federal and state laws, of maintaining a membership in its Advisory Committees that reflects the diversity of the community. Although strictly optional for Applicant, the following information is needed to meet reporting requirements and attain those goals.  Race: 9 Caucasian 9 African American 9 Hispanic 9 Asian 9 Other  Sex: 9 Male 9 Female Age: 1 Disabled? 9 Yes 9 No  District  Persons needing a special accommodation to participate in an Advisory Committee should contact Christine Coble by telephone at 606-5300 or e-mail at CobleC@leoncountyfl.gov				

In the space below briefly describe or list the following: any previous experience on other Committees; your educational background; your skills and experience you could contribute to a Committee; any of your professional licenses and/or designations and indicate how long you have held them and whether they are effective in Leon County; any charitable or community activities in which you participate; and reasons for your choice of the Committee indicated on this Application. Please attach your resume, if one is available. To begin with, I have had the experiences of both being a girl and being a woman. I also feel that I have an educational, philosophical, and employment background that would suit this committee. I have a B.A. degree in the field of Women's Studies. My degree program at Florida State University was interdisciplinary and examined gender in a variety of institutions and environments. Issues such as class, race, culture, and age, are routinely studied along with discourse on social problems and redress of personal and systemic inequalities. On a philosophical level, I have involved myself with organizations and endeavors that have sought to educate and empower on behalf of women and girls, such as a Juvenile Court Advocate in Honolulu, HI, serving on the Women of Color Caucus of the National Women's Studies Association, and being a current member of the National Organization of Women. I have completed domestic violence trainings, and crisis intervention certification. From 2008 to 2010 I volunteered each week at Planned Parenthood of North Central Florida, Inc. In my work history, I have been employed at non-profits whose mission focused on families and individuals in need, such as Children's Home Society. My job duties often required communications with a number of professionals and community groups and services. Additionally, I have strong computer skills, administrative skills and I communicate well with diverse groups in diverse environments as I grew up in an academic family that had many travel opportunities and multi-cultural friendships and associations. I would be honored to be able to add to my involvement with social issues and learn more about my fellow community members.

References (you must provide at least one personal reference who is not a family member):

Name: Sandi Lodge, Administrator, Planned Parenthood of North Central Florida Telephone: 850-574-7455

Address: 2121 West Pensacola Street, Tailahassee, FL 32304

Name: Alice Bejnar, Clinician, FSU Autism Institute Telephone: 850-509-5968

Address: Florida State University Autism Institute, Tallahassee, FL 32306

## IMPORTANT LEGAL REQUIREMENTS FOR ADVISORY COMMITTEE MEMBERSHIP

AS A MEMBER OF AN ADVISORY COMMITTEE, YOU WILL BE OBLIGATED TO FOLLOW ANY APPLICABLE LAWS REGARDING GOVERNMENT-IN-THE-SUNSHINE, CODE OF ETHICS FOR PUBLIC OFFICERS, AND PUBLIC RECORDS DISCLOSURE. THE CONSEQUENCES OF VIOLATING THESE APPLICABLE LAWS INCLUDE CRIMINAL PENALTIES, CIVIL FINES, AND THE VOIDING OF ANY COMMITTEE ACTION AND OF ANY SUBSEQUENT ACTION BY THE BOARD OF COUNTY COMMISSIONERS. IN ORDER TO BE FAMILIAR WITH THESE LAWS AND TO ASSIST YOU IN ANSWERING **FOLLOWING** QUESTIONS, YOU MUST COMPLETE THE **ORIENTATION PUBLICATION** www.leoncountyfl.gov/bcc/committees/training\_asp BEFORE YOUR APPLICATION IS DEEMED COMPLETE. Have you completed the Orientation? 9 Yes 9 No Are you willing to complete a financial disclosure form and/or a background check, if applicable? 9 No Will you be receiving any compensation that is expected to influence your vote, action, or participation If yes, from whom? on a Committee? 9 Yes ∮ No Do you anticipate that you would be a stakeholder with regard to your participation on a Committee? 9 Yes **∮** No Do you know of any circumstances that would result in you having to abstain from voting on a Committee due to voting conflicts? 9 Yes ¶No ) If yes, please explain Do you or your employer, or your spouse or child or their employers, do business with Leon County? 9 Yes 9/No If yes, please explain Do you have any employment or contractual relationship with Leon County that would create a continuing or frequently recurring conflict with regard to your participation on a Committee? 9 Yes If yes, please explain All statements and information provided in this application are true to the best of my knowledge. Signature:

Please return Application

by mail: Christine Coble, Agenda Coordinator

**Leon County Board of County Commissioners** 

301 South Monroe Street Tallahassee, FL 32301

by email: coblec@leoncountyfl.gov